STATE OF CALIFORNIA

OFFICE OF EMERGENCY SERVICES

CALIFORNIA COUNTER DRUG PROCUREMENT PROGRAM
PROPERTY RECEIPT

OES-657 (REV. 05/08)

THIS FORM MUST BE TYPED (HANDWRITTEN OR NOT LEGIBLE FORMS WILL BE RETURNED)

1 *Agency Name:*_____ *herein after identified as the California Law Enforcement Agency (LEA) acknowledges the transaction listed below has been completed. We, the undersigned LEA, have read and understand the California State Plan of Operation, signed by our agency and the State of California. We understand and agree to comply with the terms and conditions indicated therein. We also understand and agree that it is the LEA's responsibility to maintain accurate and accessible documentation regarding this property receipt.* **The LEA agrees to submit a copy of this form, accompanied by all DD Form 1348s that pertain to this receipt, to the State Coordinator's Office.** *The undersigned Law Enforcement Agency waives and releases any claim against the Office of Emergency Services and the State of California, for any injury or loss that may occur as a result of the use of the equipment procured under this program. Additionally, (Law Enforcement Agency) further understands the requirements for the proper disposition of DEMIL Items.*

2 **Screening Date:**_____ **Was all Requested Property received: Yes _____ No _____ DD 1348 attached_____** *Please ensure appropriate 1348's are attached*

3 Property Location	4 Item	5 Qty	6 Unit Price	7 NSN	8 DTID	9 Demil

Please fill out as thoroughly as possible and if the list of property exceeds the space provided, use additional pages marked Continuation

The LEA has sole responsibility of maintaining documentation that validates the receipt, transfer, and destruction of equipment acquired under this program. All documentation is subject to review on demand, by DLA, LESO, and State Coordinator representatives. It is the LEA's responsibility to furnish the State Coordinator's Office with any changes that occur at the property pick up point (either a changed quantity or non pickup.) Failure to provide this information will result in your agency being charged for all the property originally approved by LESO. You must return this form for all received items and must attach a 1348. If there are any changes to the actual quantity received, the notation must be indicated on the issuing 1348 and initiated by both the LEA and the DRMO. This form and the 1348 must be faxed to the State Coordinator's Office at: **(916) 327- 8714.**

10 All/Partial property **was received**:

11 **Please submit a OES-657A if partial of the equipment was received.**

12

SIGNATURE   PRINT NAME   DATE   PHONE/FAX NUMBER

13

State Coordinator Approval: Date: